

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Iowa

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1902(1)(3)(E) and 1902(r)(2) of the Act	<p>e. <u>Poverty level pregnant women, infants, and children.</u> For pregnant women and infants or children covered under the provisions of sections 1902(a)(10)(A)(i)(IV), (VI), and (VII) and 1902(a)(10)(A)(ii)(IX) of the Act--</p> <p>(1) The following methods are used in determining countable income:</p> <p><u>X</u> The methods of the State's approved AFDC plan. ✓</p> <p>___ The methods of the approved title IV-E plan.</p> <p>___ The methods of the approved AFDC State plan and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u></p> <p>___ The methods of the approved title IV-E plan and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u></p>

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	(2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.
1902(e)(6) of the Act	(3) The agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.
1905(p)(1), 1902(m)(4), and 1902(r)(2) of the Act	f. <u>Qualified Medicare beneficiaries.</u> In determining countable income for qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, the following methods are used:  <u>X</u> The methods of the SSI program only.  ____ SSI methods and/or any more liberal methods than SSI described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u>  <u>X</u> For institutional couples, the methods specified under section 1611(e)(5) of the Act.

State: Iowa

## Citation

## Condition or Requirement

If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.

1905(s) of the Act

g. (1) Qualified disabled and working individuals.

In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.

1905(p) of the Act

(2) Specified low-income Medicare beneficiaries.

In determining countable income for specified low-income Medicare beneficiaries covered under 1902(a)(10)(E)(iii) of the Act, the same method as in f. is used.

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Citation

Condition or Requirement

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1902(u)  
of the Act

(h) COBRA Continuation Beneficiaries

In determining countable income for COBRA continuation beneficiaries, the following disregards are applied:

\_\_\_ The disregards of the SSI program.

\_\_\_ The agency uses methodologies for treatment of income more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to ATTACHMENT 2.6-A.

NOTE: For COBRA continuation beneficiaries specified at 1902(u)(4), costs incurred from medical care or for any other type of remedial care shall not be taken into account in determining income, except as provided in section 1612(b)(4)(B)(ii).

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State: Iowa

Citation	Condition or Requirement
1902(k) of the Act	<p>2. Medicaid Qualifying Trusts</p> <p>a. In the case of a Medicaid qualifying trust described in section 1902(k)(2) of the Act, the amount from the trust that is deemed available to the individual who established the trust (or whose spouse established the trust) is the maximum amount that the trustee(s) is permitted under the trust to distribute to the individual. This amount is deemed available to the individual, whether or not the distribution is actually made. This provision does not apply to any trust or initial trust decree established before April 7, 1986, solely for the benefit of a mentally retarded individual who resides in an intermediate care facility for the mentally retarded.</p> <p>This provision applies to trusts established on or before August 10, 1993.</p> <p><input type="checkbox"/> The agency does not count the funds in a trust as described above in any instance where the State determines that it would work an undue hardship. <u>Supplement 10 of ATTACHMENT 2.6-A</u> specifies what constitutes an undue hardship.</p>
1917(d) of the Act	<p>b. In the case of trusts established after August 10, 1993 (as of October 1, 1993), the State complies with Section 1917(d) requirements as added by the Omnibus Budget Reconciliation Act of 1993.</p> <p><input checked="" type="checkbox"/> The agency does not count the funds in a trust as described above in any instance where the State determines that it would work an undue hardship. <u>Supplement 10 of ATTACHMENT 2.6-A</u> specifies what constitutes an undue hardship.</p>
1902(a)(10) of the Act	<p>3. Medically needy income levels (MNILs) are based on family size.</p> <p><u>Supplement 1 to ATTACHMENT 2.6-A</u> specifies the MNILs for all covered medically needy groups. If the agency chooses more restrictive levels under section 1902(f) of the Act, <u>Supplement 1</u> so indicates.</p>

State: Iowa

<u>Citation</u>	<u>Condition or Requirement</u>
42 CFR 435.732, 435.831	<p>4. Handling of Excess Income - Spend-down for the Medically Needy in All States and the Categorically Needy in 1902(f) States Only</p> <p>a. <u>Medically Needy</u></p> <p>(1) Income in excess of the MNIL is considered as available for payment of medical care and services. The Medicaid agency measures available income for a period of <u>two*</u> months to determine the amount of excess countable income applicable to the cost of medical care and services.</p> <p>* For Medically Needy cases that result in spenddown, a two-month certification period (budget period) is assigned.</p> <p>For ADC-related and CMAP-related Medically Needy cases that result in a zero spenddown when six months' income is evaluated against six months' MNIL, a six-month certification period is assigned. For Medically Needy cases that result in spenddown when six months' income is evaluated against six months' MNIL, a two-month certification period (budget period) is assigned.</p> <p>SSI-related Medically Needy cases that do not result in spenddown are maintained as categorically needy cases until the later of the first month that income exceeds a one-month MNIL or the first month following the timely notification.</p>
42 CFR 435.831(f)(1)	<p>For Medically Needy cases, the retroactive certification period begins with the first month Medicaid-covered services were received and continues to the end of the month immediately prior to the month of application. A one-month, two-month, or three-month retroactive certification period is assigned, depending on when the first month of Medicaid-covered services were received.</p>

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## ELIGIBILITY CONDITIONS AND REQUIREMENTS

<u>Citation</u>	<u>Condition or Requirement</u>
42 CFR 435.732, 435.831	(2) If countable income exceeds the MNIL standard, the agency deducts the following incurred expenses in the following order: <ul style="list-style-type: none"> <li>(a) Health insurance premiums, deductibles and coinsurance charges.</li> <li>(b) Expenses for necessary medical and remedial care not included in the plan by chronological date of submission.</li> <li>(c) Expenses for necessary medical and remedial care included in the plan by chronological date of submission.</li> </ul> <p>Reasonable limits on amounts of expenses deducted from income under a. (2)(a) and (b) above are listed below.</p>
1902(a)(17) of the Act	Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly funded program (other than Medicaid) of a state or local government.
42 CFR 435.831(g)(2) and (6)	All medical expenses incurred before application are deducted no matter how far back in time the expenses are incurred, if they have not already been used in another certification period, if the individual is still liable for them, or if the individual has paid for them in the current certification period. This does not include expenses incurred in a certification period when spenddown was not met, unless the certification period was a retroactive period.
42 CFR 435.831(f)(3)	Paid or unpaid medical expenses incurred in the retroactive certification period and not previously deducted in establishing eligibility are deducted from excess income in the two-month certification period immediately following the retroactive period.
1903(f)(2) of the Act	(3) If countable income exceeds the MNIL standard, the agency deducts spenddown payments made to the state by the individual.

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Citation	Condition or Requirement
42. CFR 435.732	<p>b. <u>Categorically Needy - Section 1902 (f) States</u></p> <p>The agency applies the following policy under the provisions of section 1902(f) of the Act. The following amounts are deducted from income to determine the individual's countable income:</p> <ol style="list-style-type: none"><li>(1) Any SSI benefit received.</li><li>(2) Any State supplement received that is within the scope of an agreement described in sections 1616 or 1634 of the Act, or a State supplement within the scope of section 1902(a)(10)(A)(ii)(XI) of the Act.</li><li>(3) Increases in OASDI that are deducted under §§435.134 and 435.135 for individuals specified in that section, in the manner elected by the State under that section.</li><li>(4) Other deductions from income described in this plan at <u>Attachment 2.6-A, Supplement 4</u>.</li><li>(5) Incurred expenses for necessary medical and remedial services recognized under State law.</li></ol>
1902(a)(17) of the Act, P.L. 100-203	Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly funded program (other than Medicaid) of a State or local government.

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Citation

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b. Categorically Needy - Section 1902 (f) States  
(Continued)

1903(f)(2)  
of the Act

\_\_\_\_ (6) Spenddown payments made to the State by the individual.

NOTE: FFP will be reduced to the extent a State is paid a spenddown payment by the individual.

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Citation

Condition or Requirement

5. Methods for Determining Resources

a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).

(1) In determining countable resources for AFDC-related individuals, the following methods are used:

(a) The methods under the State's approved AFDC plan; and

☒ (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.

(2) In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.

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